

SERFF Tracking Number:	MTLC-125832601	State:	Arkansas
Filing Company:	MTL Insurance Company	State Tracking Number:	40560
Company Tracking Number:	1BP AR		
TOI:	L07I Individual Life - Whole	Sub-TOI:	L07I.101 Fixed/Indeterminate Premium - Single Life
Product Name:	Economax		
Project Name/Number:	Economax/1BP AR		

Filing at a Glance

Company: MTL Insurance Company	SERFF Tr Num: MTLC-125832601	State: ArkansasLH
Product Name: Economax	SERFF Status: Closed	State Tr Num: 40560
TOI: L07I Individual Life - Whole	Co Tr Num: 1BP AR	State Status: Approved-Closed
Sub-TOI: L07I.101 Fixed/Indeterminate Premium - Single Life		
Filing Type: Form	Co Status:	Reviewer(s): Linda Bird
	Author: Laura Callahan	Disposition Date: 10/21/2008
	Date Submitted: 10/14/2008	Disposition Status: Approved
Implementation Date Requested: On Approval		Implementation Date:
State Filing Description:		

General Information

Project Name: Economax	Status of Filing in Domicile: Pending
Project Number: 1BP AR	Date Approved in Domicile:
Requested Filing Mode:	Domicile Status Comments:
Explanation for Combination/Other:	Market Type: Individual
Submission Type:	Group Market Size:
Overall Rate Impact:	Group Market Type:
Filing Status Changed: 10/21/2008	
State Status Changed: 10/21/2008	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	
Form 1BP AR is new and is being submitted for approval.	

Form 1BP AR is a Modified Whole Life Insurance Policy payable upon the Insured's death. The Guaranteed Face Amount decreases after the first policy year. Dividends are credited annually and the policy is participating. This policy will be marketed by our agency field force. It is not intended for restricted use in any specific market, nor for direct or mass marketing.

SERFF Tracking Number:	MTLC-125832601	State:	Arkansas
Filing Company:	MTL Insurance Company	State Tracking Number:	40560
Company Tracking Number:	1BP AR		
TOI:	L071 Individual Life - Whole	Sub-TOI:	L071.101 Fixed/Indeterminate Premium - Single Life
Product Name:	Economax		
Project Name/Number:	Economax/1BP AR		

Company and Contact

Filing Contact Information

Laura Callahan, Product Filing Coordinator 1200 Jorie Blvd. Oak Brook, IL 60522	CallahanL@mutualtrust.com (630) 684-5319 [Phone] (630) 684-5487[FAX]
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Filing Company Information

MTL Insurance Company 1200 Jorie Blvd. Oak Brook, IL 60522 (800) 323-7320 ext. [Phone]	CoCode: 66427 Group Code: -99 Group Name: FEIN Number: 36-1516780 -----	State of Domicile: Illinois Company Type: Life State ID Number:
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Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	Yes
Fee Explanation:	1 form at \$50.00
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
MTL Insurance Company	\$50.00	10/14/2008	23173221

<i>SERFF Tracking Number:</i>	<i>MTLC-125832601</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>MTL Insurance Company</i>	<i>State Tracking Number:</i>	<i>40560</i>
<i>Company Tracking Number:</i>	<i>1BP AR</i>		
<i>TOI:</i>	<i>L071 Individual Life - Whole</i>	<i>Sub-TOI:</i>	<i>L071.101 Fixed/Indeterminate Premium - Single Life</i>
<i>Product Name:</i>	<i>Economax</i>		
<i>Project Name/Number:</i>	<i>Economax/1BP AR</i>		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Linda Bird	10/21/2008	10/21/2008

SERFF Tracking Number: MTLC-125832601

State: Arkansas

Filing Company: MTL Insurance Company

State Tracking Number: 40560

Company Tracking Number: 1BP AR

TOI: L071 Individual Life - Whole

Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single Life

Product Name: Economax

Project Name/Number: Economax/1BP AR

Disposition

Disposition Date: 10/21/2008

Implementation Date:

Status: Approved

Comment:

Rate data does NOT apply to filing.

<i>SERFF Tracking Number:</i>	<i>MTLC-125832601</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>MTL Insurance Company</i>	<i>State Tracking Number:</i>	<i>40560</i>
<i>Company Tracking Number:</i>	<i>1BP AR</i>		
<i>TOI:</i>	<i>L071 Individual Life - Whole</i>	<i>Sub-TOI:</i>	<i>L071.101 Fixed/Indeterminate Premium - Single Life</i>
<i>Product Name:</i>	<i>Economax</i>		
<i>Project Name/Number:</i>	<i>Economax/1BP AR</i>		

Item Type	Item Name	Item Status	Public Access
Supporting Document	Certification/Notice		Yes
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Readability		Yes
Form	Modified Whole Life Insurance Policy		Yes

SERFF Tracking Number:	MTLC-125832601	State:	Arkansas
Filing Company:	MTL Insurance Company	State Tracking Number:	40560
Company Tracking Number:	1BP AR		
TOI:	L071 Individual Life - Whole	Sub-TOI:	L071.101 Fixed/Indeterminate Premium - Single Life
Product Name:	Economax		
Project Name/Number:	Economax/1BP AR		

Form Schedule

Lead Form Number: Form 1BP AR

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	Form 1BP AR	Policy/Cont	Modified Whole Life	Initial		50	Form 1BP AR.pdf
		ract/Fratern	Insurance Policy				
		al					
		Certificate					



MTL INSURANCE COMPANY

1200 Jorie Boulevard • Oak Brook, Illinois 60522-9060

Toll Free: 1-800-323-7320

Founded in 1904

Policy Number: [999999914A]
Insured: [John Trust]

Date of Issue: [August 1, 2008]

Face Amount:

First Policy Year: [\$100,000.00]

Subsequent Years: [\$30,000.00]

MODIFIED WHOLE LIFE INSURANCE POLICY

We, **MTL INSURANCE COMPANY**, will pay the Face Amount to the beneficiary upon receipt of proof of the death of the Insured, subject to the provisions on this and the following pages.

The Date of Issue is the date on which the first premium is due and the date from which policy years, anniversaries, and premium due dates are determined.

This is a **MODIFIED WHOLE LIFE INSURANCE POLICY** payable upon the Insured's death prior to the Maturity Date. The Face Amount decreases after the first policy year. Premiums are payable for the period shown on page 3. Dividends are credited annually.

Please examine this policy carefully. If you are not satisfied with it for any reason, **YOU HAVE A RIGHT TO CANCEL THIS POLICY WITHIN TWENTY DAYS** after you receive it. To cancel, deliver or mail this policy to an MTL agent or to the Home Office at any time within twenty days after delivery. Upon its return, the premium will be refunded in full and without question.

Notice of Right to Vote. While this policy is in force, the Owner is a member of the Company and has the right to vote in person or by proxy at all meetings of the Company.

Signed for the Company at Oak Brook, Illinois

[

Geri Laughan

Secretary

Stephen M. Batza

President

]

Registrar

A GUIDE TO THE POLICY

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POLICY SPECIFICATIONS

INSURED INFORMATION

Policy Number:	[999999914A]	Date of Issue:	[August 01, 2008]
Insured:	[John Trust]	Face Amount:	
Issue Age / Sex:	[35 / Male]	First Policy Year:	[\$100,000.00]
		Subsequent Years:	[\$30,000.00]
		Premium Class:	[Standard]
		Annual Policy Fee:	[\$50.00]

Beneficiary is as stated in the application, unless subsequently changed.

Owner is as stated in the application, unless subsequently changed.

Dividends are not guaranteed.

SCHEDULE OF BENEFITS AND PREMIUMS

Basic Plan	Plan Description / Class	Face Amount	Maturity Date or Expiry Date	Annual Premium	Years Payable
1BP	Modified Whole Life		[August 01, 2094]	[\$640.00]	[65]
	First Policy Year	[\$100,000.00]			
	Subsequent Years (1)	[\$30,000.00]			
	[Non-Tobacco]				

Total Annual Premium: [\$640.00]

(1) See Initial Dividend Option section under Dividend Provisions on Page 5.

[Indiana] Department of Insurance telephone number: [999-999-9999]

Loan Interest Rate is Variable.

PREMIUM PROVISIONS

PAYMENT

Premiums are payable for the period stated on page 3 or until the earlier death of the Insured. Each premium is payable on or before its due date, either at the Home Office or to an authorized agent of the Company. A receipt signed by the President or a Secretary of the Company will be furnished on request.

MODE OF PAYMENT

Premiums on the policy are payable annually. With the approval of the Company, premiums may be paid more frequently at applicable rates, as elected in the application or requested later.

DEFAULT

Any premium after the first which is not paid on or before its due date is in default. This policy will then terminate except as provided under the Grace Period, Automatic Premium Payment, and Non-Forfeiture Provisions.

GRACE PERIOD

A grace period of thirty-one days will be allowed for the payment of each premium after the first. During this period, the policy will continue in force.

AUTOMATIC PREMIUM PAYMENT

This provision may be elected in the application or by written request before default in payment of a premium and will remain in effect until that election is cancelled.

If a premium remains unpaid at the end of the grace period, a quarterly premium will be paid automatically by the Company by first using any dividend accumulations and then making a policy loan, subject to the Loan Provisions. However, if the mode of payment is annual or semi-annual and a sufficient amount is available, the appropriate premium will be paid. If the amount available is not sufficient to pay a quarterly premium, the premium will remain in default.

REINSTATEMENT

This policy may be reinstated within five years after the due date of the first premium in default. However, the policy cannot be reinstated if it has been surrendered or if the Insured is not living. Payment of all past due premiums and payment or reinstatement of any policy loan will be required. Interest will be charged on this amount at an annual rate not exceeding 6%. There will be no further requirements if the policy is reinstated within sixty days after the due date of the first premium in default. Otherwise, evidence of insurability will be required. This evidence will be waived if the policy is being continued as extended term insurance with a remaining term of at least five years and is reinstated without the additional benefits, if any, shown on Page 3. The Company will rely on the statements made in the reinstatement application. The Company will also continue to rely on the statements made in the original application if this policy is being reinstated at a time when the original contestable period has not yet expired. Upon reinstatement of this policy, it shall become incontestable after it has been in force during the Insured's lifetime for two years from the date of reinstatement.

DIVIDEND PROVISIONS

This policy while in force except as extended term insurance will share in the divisible surplus of the Company. The share applicable to this policy will be determined annually by the Company and credited as a dividend at the end of each policy year. Dividends are not guaranteed.

INITIAL DIVIDEND OPTION

The dividends are used to purchase a combination of paid-up additional insurance and one year term insurance in an amount intended to maintain the First Policy Year Face Amount. However, the maintenance of the First Policy Year Face Amount is not guaranteed. The First Policy Year Face Amount is shown on page 3.

After the first policy year, the death benefit under this option will be equal to the total of the following:

- 1) The Face Amount for Subsequent Years, as shown on page 3; plus
- 2) A combination of paid-up additional insurance and one year term insurance purchased by previous dividends.

If any dividend is not sufficient to maintain the First Policy Year Face Amount, the dividend will be used to purchase as much one year term insurance as possible.

This option automatically terminates whenever the sum of the Face Amount for Subsequent Years and the paid-up additional insurance is greater than the First Policy Year Face Amount. All future dividends will then be used to purchase paid-up additional insurance unless the Owner elects otherwise.

This dividend option will no longer be in effect or available after another dividend option has been elected or any paid-up additional insurance has been surrendered, or if premiums prior to age 100 are no longer being paid. The dividend option may be changed by written request.

OTHER DIVIDEND OPTIONS AVAILABLE

Each dividend will be applied under one or a combination of the following options, or in any other manner agreed upon with the Company, as elected in the application for this policy or by later written request.

1. **Cash** Dividends paid in cash.
2. **Premium Payment** Dividends used to reduce premium payments.
3. **Dividend Accumulation** Dividends will be left with the Company to accumulate at interest at a rate of not less than 2% a year. Dividend accumulations may be withdrawn upon written request. Dividend accumulations shall be paid to the Owner upon termination of the policy.
4. **Paid-Up Addition** Dividends will be used to purchase paid-up additional insurance. These additions will also share in the divisible surplus of the Company. They will always have a cash value at least equal to the dividends used to purchase them and may be surrendered upon written request. The cash value of any paid up dividend additions shall be paid to the Owner upon termination of the policy.
5. **One-Year Term** Dividends will be used to purchase one-year term insurance.

AUTOMATIC DIVIDEND OPTION

Upon the termination of the initial dividend option if no option is elected, dividends will be used to purchase paid-up additions.

GENERAL PROVISIONS

ENTIRE CONTRACT

This policy and the written application, a copy of which is attached and made a part of this policy when issued, constitute the entire contract. All statements made in the application are representations and not warranties. No statement will be used to defend a claim under this policy unless contained in the application.

ENDORSEMENT AND MODIFICATION

The provisions of this policy may not be changed or waived, except in writing signed by the President, a Vice President, a Secretary, or an Assistant Secretary of the Company.

RIGHTS OF OWNER

During the lifetime of the Insured, the Owner will have all rights in this policy. In the case where a Joint Owner is named on the policy, all rights in this policy will be equally shared between the Joint Owners. In the case where a Contingent Owner is named on this policy, all rights to this policy will remain with the Owner during the Owner's lifetime. If the Owner should die while this policy is in force, the Contingent Owner will have all ownership rights in this policy. The rights of a deceased Owner will pass to the estate of that Owner if there is no Contingent Owner and unless otherwise provided.

CHANGE OF OWNER OR BENEFICIARY

At any time while the Insured is living, the Owner or beneficiary may be changed by written request to the Company. No change of Owner or beneficiary will be effective until it has been recorded at the Home Office of the Company. When recorded, subject to any earlier action taken or payment made by the Company, the change will take effect as of the date it was signed.

DEATH OF BENEFICIARY

Unless otherwise provided, (a) if a beneficiary dies before the Insured, the interest of that beneficiary will pass to the Owner, or (b) if a beneficiary dies at the same time or within ten days after the Insured and before payment of the death benefit, payment will be made as if the beneficiary had died before the Insured.

ASSIGNMENT

The Company will adhere to the provisions of a properly executed assignment, except in situations where restrictions are required for tax qualification purposes or for purposes of satisfying applicable laws or regulations. Assignments must be

sent to the Company's Home Office. If approved, the Company will send confirmation that it has received and processed the assignment to the assignee. The Company will not be bound by any assignment of this policy until the assignment is filed and processed at the Home Office of the Company. All assignments, unless otherwise specified by the Owner, shall take effect on the date the notice of assignment is signed by the Owner, subject to any payments made or actions taken by the Company prior to receipt of this notice. The Company assumes no responsibility for the validity or effect of any assignment.

MISSTATED AGE OR SEX

If the age or sex of the Insured has been misstated, any amount payable under this policy will be that which the premium paid would have purchased at the correct age or sex.

INCONTESTABILITY

This policy will be incontestable after it has been in force during the lifetime of the Insured for two years from its date of issue.

SUICIDE

If the Insured dies by suicide within one year from the date of issue of this policy, our liability will be limited to the amount of premiums paid.

DEATH BENEFIT PAYMENT

Any dividend credits and any premium paid for a period beyond the policy month in which the Insured died will be included in the death benefit. If the Insured dies during the grace period, any premium due will be deducted from the death benefit. Interest on the death benefit will accrue at the rate applicable to the policy for funds left on deposit. The Company shall determine this rate by using the rate in effect on the date due proof is received by the Company. Interest will be payable from date of death. Additional interest will accrue at a rate of 10% annually beginning 31 calendar days from the date that due proof is received by the Company. If the death benefit is not paid within 30 days from the receipt of the proof of death interest will be paid at a rate of 8% a year.

LOAN PROVISIONS

LOAN AVAILABILITY

The Company will loan on the sole security of this policy an amount not in excess of its cash value and that of any paid-up additions. Loans may be made at any time after the first anniversary of the policy while it is in force except as extended term insurance. There will be deducted from the loan (a) interest in advance to the date the next regularly billed premium is due, or to the end of the current policy year if no regularly billed premium is due, (b) any existing loan on this policy, and (c) any regularly billed premium due within fifteen days or in default not more than sixty days if the Insured is living. The Company may delay payment for not more than six months unless the loan is to pay premiums to the Company.

LOAN INTEREST

Interest on a policy loan is payable in advance. The rate charged will not change during the policy year.

The Maximum Rate is the greater of the Published Monthly Average for the calendar month ending two months before the date on which the Company sets the rate, or the rate used to compute the cash value during the applicable period plus 1% a year. The Published Monthly Average means Moody's Corporate Bond Yield Average-Monthly Average Corporates as published by Moody's Investors Services, Inc., or its successor. If Moody's Corporate Bond Yield Average-Monthly Average Corporates is no longer published, the Published Monthly Average will mean the rate set by the insurance regulatory agency where this Contract is issued. Subject to the provisions of the next paragraph regarding changes in interest rate, the Company's loan interest rate will not exceed the Maximum Rate.

Once each Contract Year, the Company will determine a new Maximum Rate. The Company's loan interest rate may be increased, by no less than 1/2%, to a rate equal to or less than the new Maximum Rate, if the new Maximum Rate is at least 1/2% higher than the Company's loan interest rate for the preceding year. If the new Maximum Rate is 1/2% or more lower than the Company's loan interest rate for the preceding year, the Company's loan interest rate will be reduced to a rate equal to or less than the new Maximum Rate. The Company will give notice of the initial loan interest rate in effect when the Owner makes a loan. If there is an outstanding loan, the Company will send reasonable advance notice of any increase in rate. All notices will be mailed to the Owner's, and any assignee's, last known address.

Interest not paid when due will be added to the loan and bear interest on the same terms. If at any time the total loan, including interest due and accrued, equals or exceeds the cash value of this policy and of any paid-up additions, this policy will terminate thirty-one days after notice has been mailed to the last known address of the Owner and of any assignee of record. Upon termination any dividend accumulations shall be paid to the Owner.

LOAN REPAYMENT

Repayment of a loan may be made in full or in part at any time while this policy is in force. Any existing loan will be deducted from the proceeds of this policy upon its termination.

SETTLEMENT OPTIONS

OPTIONS AVAILABLE

All or part of the proceeds of this policy may be paid under one or a combination of the following options, or in any other manner agreed upon with the Company. Option payments are illustrated on the following page.

1. **Interest** Left with the Company, with interest either paid annually, semi-annually, quarterly, or monthly, or accumulated. Full or partial withdrawal may be made at any time unless otherwise elected.
2. **Specified Period** Monthly payments for a specified number of years.
3. **Life Income** Monthly payments as long as the payee lives. Payments are guaranteed for ten or twenty years, or as an installment refund where the sum of all payments equals the amount applied, even if the payee dies during the guaranteed period.
4. **Specified Amount** Monthly payments of a specified amount until the proceeds with interest are exhausted.
5. **Joint and Survivor Life Income** Monthly payments as long as either of two payees is living. The payments will not be reduced following the death of the first payee. If elected, payments will be guaranteed for ten years, even if both payees die during the guaranteed period.

GUARANTEED AND ADDITIONAL INTEREST

Interest for all options is guaranteed at an effective rate of 3% a year. The tables on the following page are based on this rate. Interest in addition to that guaranteed may be credited by the Company.

OPTIONAL LIFE INCOME

If the Company's current annuity rates at the time proceeds are placed under a life income option would result in higher monthly payments than those shown in the table for that option, a payee may elect the higher payments. The guaranteed period, if any, will remain the same.

ELECTION OF OPTIONS

While the Insured is living, an option may be elected or changed by written request to the Company. After the death of the Insured, a beneficiary may elect payment under an option rather than in a single sum.

EFFECTIVE DATE OF OPTION

The effective date of any option elected will be the date this policy terminates, whether by death or otherwise. The first payment under the interest option will be made at the end of the interest period selected. The first payment under the other options will be payable as of the effective date of the option.

MINIMUM AMOUNTS

If the amount of proceeds held for a payee under any option is less than \$2,000, or if the periodic payments to a payee are less than \$20, the Company may pay the proceeds to that payee in a single sum. Total payments each year under the specified amount option must be at least 6% of the proceeds applied under that option.

EVIDENCE OF AGE

Payments under life income options are based on the age and sex of the payee or payees. The Company may require satisfactory proof of age.

SPENDTHRIFT CLAUSE

Proceeds placed under an option may not be assigned or encumbered and may not be withdrawn or commuted. To the extent permitted by law, the proceeds will not be subject to the claims of creditors or to legal process.

SETTLEMENT OPTION TABLES

Interest Option *If periodic payment of interest is elected*

For each \$1,000 of proceeds, payments will be \$2.15 monthly, \$6.48 quarterly, \$13.02 semi-annually, or \$26.25 annually.

Specified Period Option *Monthly payments for each \$1,000 of proceeds**

Number of Years	Amount	Number of Years	Amount	Number of Years	Amount	Number of Years	Amount	Number of Years	Amount	Number of Years	Amount
1	\$73.90	6	\$13.24	11	\$7.75	16	\$5.71	21	\$4.65	26	\$4.01
2	37.50	7	11.51	12	7.20	17	5.45	22	4.50	27	3.91
3	25.36	8	10.22	13	6.74	18	5.21	23	4.36	28	3.82
4	19.30	9	9.21	14	6.35	19	5.00	24	4.23	29	3.73
5	15.66	10	8.41	15	6.01	20	4.82	25	4.12	30	3.66

Life Income Option *Monthly payments for each \$1,000 of proceeds**

Age	Installment Refund		Guaranteed Period				Age	Installment Refund		Guaranteed Period				Age	Installment Refund		Guaranteed Period			
			10 Years		20 Years					10 Years		20 Years					10 Years		20 Years	
	Male	Female	Male	Female	Male	Female		Male	Female	Male	Female	Male	Female		Male	Female	Male	Female	Male	Female
25	\$2.58	\$2.55	\$2.59	\$2.56	\$2.59	\$2.56	46	\$3.03	\$2.98	\$3.10	\$3.03	\$3.07	\$3.01	67	\$4.02	\$3.99	\$4.41	\$4.29	\$4.05	\$4.03
26	2.59	2.56	2.61	2.57	2.60	2.57	47	3.06	3.01	3.13	3.06	3.10	3.04	68	4.09	4.07	4.51	4.40	4.11	4.09
27	2.61	2.58	2.62	2.59	2.62	2.58	48	3.09	3.04	3.17	3.10	3.14	3.07	69	4.16	4.14	4.61	4.51	4.16	4.15
28	2.62	2.59	2.64	2.60	2.64	2.60	49	3.12	3.07	3.21	3.14	3.17	3.11	70	4.24	4.22	4.72	4.62	4.22	4.21
29	2.64	2.61	2.66	2.62	2.65	2.62	50	3.16	3.11	3.26	3.18	3.21	3.15	71	4.32	4.31	4.84	4.74	4.27	4.27
30	2.66	2.62	2.67	2.64	2.67	2.63	51	3.20	3.14	3.30	3.22	3.25	3.19	72	4.40	4.39	4.96	4.87	4.32	4.33
31	2.67	2.64	2.69	2.65	2.69	2.65	52	3.23	3.18	3.35	3.26	3.29	3.23	73	4.48	4.49	5.08	5.00	4.37	4.38
32	2.69	2.66	2.71	2.67	2.71	2.67	53	3.27	3.22	3.40	3.31	3.33	3.27	74	4.57	4.59	5.20	5.14	4.42	4.43
33	2.71	2.67	2.73	2.69	2.73	2.69	54	3.31	3.26	3.45	3.36	3.38	3.31	75	4.66	4.68	5.33	5.29	4.46	4.48
34	2.73	2.69	2.75	2.71	2.75	2.70	55	3.36	3.30	3.50	3.41	3.42	3.36	76	4.75	4.79	5.47	5.44	4.50	4.53
35	2.75	2.71	2.78	2.73	2.77	2.72	56	3.40	3.35	3.56	3.46	3.47	3.40	77	4.85	4.90	5.60	5.59	4.54	4.57
36	2.77	2.73	2.80	2.75	2.79	2.75	57	3.45	3.40	3.62	3.52	3.52	3.45	78	4.95	5.00	5.74	5.75	4.58	4.60
37	2.79	2.75	2.82	2.77	2.81	2.77	58	3.49	3.45	3.68	3.58	3.57	3.50	79	5.05	5.12	5.88	5.91	4.61	4.64
38	2.81	2.77	2.85	2.80	2.84	2.79	59	3.54	3.50	3.75	3.64	3.62	3.56	80	5.16	5.24	6.03	6.08	4.64	4.67
39	2.84	2.79	2.88	2.82	2.86	2.81	60	3.60	3.55	3.81	3.71	3.67	3.61	81	5.27	5.36	6.17	6.24		
40	2.86	2.82	2.90	2.85	2.89	2.84	61	3.65	3.60	3.89	3.78	3.72	3.67	82	5.38	5.49	6.31	6.41		
41	2.89	2.84	2.93	2.87	2.92	2.86	62	3.70	3.66	3.96	3.86	3.78	3.72	83	5.50	5.62	6.46	6.57		
42	2.91	2.87	2.96	2.90	2.94	2.89	63	3.76	3.72	4.04	3.93	3.83	3.78	84	5.62	5.75	6.60	6.73		
43	2.94	2.89	2.99	2.93	2.97	2.92	64	3.82	3.79	4.13	4.02	3.89	3.84	85	5.74	5.88	6.74	6.88		
44	2.97	2.92	3.03	2.96	3.00	2.95	65	3.89	3.85	4.22	4.10	3.94	3.90	86			6.88	7.03		
45	3.00	2.95	3.06	2.99	3.03	2.98	66	3.95	3.92	4.31	4.20	4.00	3.96	87			7.01	7.17		

Payments are based upon the age nearest birthday of the payee on the date the first payment is due.

Specified Amount Option *Number of months payable**

Amount of Proceeds	Monthly Income Desired						Amount of Proceeds	Monthly Income Desired					
	\$50	\$100	\$200	\$300	\$400	\$500		\$500	\$600	\$700	\$800	\$900	\$1,000
\$5,000	99	47	23	15	12	9	\$50,000	99	81	68	59	52	47
10,000	229	99	47	31	23	18	75,000	159	128	107	92	81	72
15,000		159	72	47	35	28	100,000	229	181	150	128	111	99
20,000		229	99	63	47	37	150,000		314	252	210	181	159
25,000		314	128	81	59	47	200,000				314	265	229

Joint and Survivor Life Income Option *Monthly payments for each \$1,000 of proceeds**

Female Age	No Guaranteed Period					Female Age	Installment Refund				
	Male Age 50	Male Age 55	Male Age 60	Male Age 65	Male Age 70		Male Age 50	Male Age 55	Male Age 60	Male Age 65	Male Age 70
50	\$2.93	\$2.99	\$3.05	\$3.09	\$3.12	50	\$2.92	\$2.98	\$3.03	\$3.07	\$3.09
55	3.00	3.10	3.18	3.26	3.31	55	2.99	3.08	3.16	3.22	3.26
60	3.07	3.20	3.32	3.43	3.53	60	3.06	3.17	3.29	3.39	3.46
65	3.13	3.29	3.46	3.62	3.77	65	3.10	3.25	3.40	3.54	3.67
70	3.18	3.36	3.57	3.79	4.02	70	3.13	3.30	3.49	3.68	3.86

Payments are based upon the age nearest birthday of the payee on the date the first payment is due.

These options are available for other ages and sex combinations. Amounts will be furnished on request.

* Annual, semi-annual, or quarterly payments are also available. Amounts will be furnished on request. Duration of payments for specified amount option will be furnished on request.

NON-FORFEITURE PROVISIONS

Upon default in premium payment, one of the following provisions will apply:

EXTENDED TERM INSURANCE

This policy will be continued as non-participating extended term insurance at the end of the grace period if it is in a Preferred or Standard Class and no other non-forfeiture provision has been elected. The amount of this term insurance will be the face amount of this policy increased by any paid-up additions and dividend accumulations, less any policy loan. This term insurance will begin on the due date of the premium in default and will extend for as long a term as the cash surrender value will purchase as a net single premium. However, if the cash surrender value would provide as much or more paid-up insurance than term insurance, the paid-up insurance will be purchased instead.

PAID-UP INSURANCE

This policy will be continued as participating paid-up insurance at the end of the grace period if it is in a Special Premium Class. The amount of this paid-up insurance will be that which can be purchased by the cash surrender value as a net single premium on the date of default. If this policy is in a Preferred or Standard Class, this provision may be elected by written request at any time if no premium is in default more than sixty days.

CASH SURRENDER

This policy may upon written request be surrendered for its cash surrender value, which is the cash value of this policy increased by the cash value of any paid-up additions, any dividend accumulations, and any outstanding dividend and reduced by any policy loan. Within sixty days after default in payment of a premium, the cash surrender value will be calculated as of that premium due date. The cash surrender value of extended term insurance or paid-up insurance at any time will be the then current net single premium for that insurance, less any policy loan. However, the surrender value as of any policy anniversary will apply for thirty-one days after that date.

Whenever one-year term insurance is purchased by dividends in connection with a policy, the policy shall provide for the return of the unearned charge in the event of termination of the policy other than by death prior to the expiration of such one year term insurance.

The Company may delay payment for not more than six months after a request is made for cash surrender. If payment is delayed for thirty days or more, interest at a rate not less than 3% a year will be paid from the date of request to the date of payment.

DEPOSIT PRIVILEGE

If this policy is surrendered and the proceeds placed under a settlement option other than the interest option, a single deposit may be made at the time of surrender to increase the proceeds. This deposit privilege is available between the policy anniversary nearest the Insured's sixtieth birthday and that nearest the Insured's seventieth birthday, but only if the policy has been in force for five years and no premium is in default. The maximum acceptable deposit is that which, when added to the cash value and applied under the life income option with a guaranteed period of ten years, would result in a monthly income of \$10 for each \$1,000 of face amount of this policy. A charge not exceeding 3% of the deposit amount, plus any applicable premium taxes, may be made by the Company. Maximum deposit amounts for various ages will be furnished on request.

BASIS OF VALUES

The cash values, reserves, and net single premiums referred to in this policy are based on the Commissioners 2001 Standard Ordinary Mortality Table, Aggregate, Male/Female, Ultimate scale, with ages based on age nearest birthday. Semi-continuous functions and an interest rate of 4% a year are used to calculate the cash values and reserves. The cash value of this policy is equal to the value shown on the Table of Values page of this policy on and after the policy anniversary specified on that page. Values for policy years not shown are calculated on the same basis and will be furnished upon request.

The cash values of this policy equal or exceed those required by the laws of the state in which it is delivered as well as required by or pursuant to the NAIC Standard Nonforfeiture Law for Life Insurance. A detailed statement of the method of computing these values has been filed with the insurance officials of that state.

TABLE OF VALUES

[999999914A]

For explanation, see Non-Forfeiture, Loan, and Basis of Values Provisions. These values assume no policy loans and no credits resulting from dividends. Values for other dates will be furnished upon request.

End Of Policy Year	Attained Age	Cash Value	Paid – Up Insurance	Extended Term Insurance	
				Years	Days
1	[36]	[0.00]	[0.00]	[0]	[0]
2	[37]	[0.00]	[0.00]	[0]	[0]
3	[38]	[71.00]	[400.00]	[1]	[241]
4	[39]	[393.00]	[1,700.00]	[7]	[170]
5	[40]	[725.00]	[2,900.00]	[11]	[209]
6	[41]	[1,067.00]	[4,200.00]	[14]	[239]
7	[42]	[1,420.00]	[5,300.00]	[16]	[295]
8	[43]	[1,783.00]	[6,500.00]	[18]	[177]
9	[44]	[2,155.00]	[7,600.00]	[19]	[264]
10	[45]	[2,536.00]	[8,600.00]	[20]	[232]
11	[46]	[2,926.00]	[9,600.00]	[21]	[126]
12	[47]	[3,326.00]	[10,500.00]	[21]	[335]
13	[48]	[3,736.00]	[11,500.00]	[22]	[137]
14	[49]	[4,160.00]	[12,300.00]	[22]	[267]
15	[50]	[4,596.00]	[13,200.00]	[22]	[356]
16	[51]	[5,046.00]	[14,000.00]	[23]	[46]
17	[52]	[5,508.00]	[14,800.00]	[23]	[73]
18	[53]	[5,980.00]	[15,600.00]	[23]	[78]
19	[54]	[6,462.00]	[16,300.00]	[23]	[62]
20	[55]	[6,952.00]	[17,000.00]	[23]	[27]
At Attained Age	[55]	[6,952.00]	[17,000.00]	[23]	[27]
At Attained Age	[60]	[9,514.00]	[20,100.00]	[21]	[341]
At Attained Age	[65]	[12,236.00]	[22,500.00]	[20]	[46]

Modified Whole Life
 First Policy Year [100,000.00]
 Subsequent Years (1) [30,000.00]

Issue Age: [35]

(1) See Initial Dividend Option under Dividend Provisions on Page 5.



MTL INSURANCE COMPANY

1200 Jorie Boulevard • Oak Brook, Illinois 60522-9060

Founded in 1904

MODIFIED WHOLE LIFE INSURANCE POLICY

This is a **MODIFIED WHOLE LIFE INSURANCE POLICY** payable upon the Insured's death prior to the Maturity Date. The Face Amount decreases after the first policy year. Premiums are payable for the period shown on page 3. Dividends are credited annually.

<i>SERFF Tracking Number:</i>	<i>MTLC-125832601</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>MTL Insurance Company</i>	<i>State Tracking Number:</i>	<i>40560</i>
<i>Company Tracking Number:</i>	<i>1BP AR</i>		
<i>TOI:</i>	<i>L071 Individual Life - Whole</i>	<i>Sub-TOI:</i>	<i>L071.101 Fixed/Indeterminate Premium - Single Life</i>
<i>Product Name:</i>	<i>Economax</i>		
<i>Project Name/Number:</i>	<i>Economax/1BP AR</i>		

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: MTLC-125832601

State: Arkansas

Filing Company: MTL Insurance Company

State Tracking Number: 40560

Company Tracking Number: 1BP AR

TOI: L071 Individual Life - Whole

Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single Life

Product Name: Economax

Project Name/Number: Economax/1BP AR

Supporting Document Schedules

Review Status:

Satisfied -Name: Certification/Notice

09/25/2008

Comments:

Attachment:

STATE OF ARKANSAS compliance form.pdf

Review Status:

Satisfied -Name: Readability

10/14/2008

Comments:

Attachment:

Readability.pdf

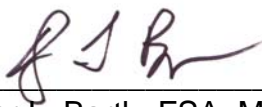
STATE OF ARKANSAS
CERTIFICATION OF COMPLIANCE

Company Name: MTL Insurance Company

Form Title(s): Modified Whole Life Insurance Policy

Form Numbers(s): 1BP AR

I hereby certify that to the best of my knowledge and belief, the above form(s) and submission complies with Reg. 19 and 49, as well as the other laws and regulations of the State of Arkansas.



Roger L. Barth, FSA, MAAA
Vice President

October 14, 2008
Date

CERTIFICATION OF READABILITY

State of

Form Number

Flesch Readability Score

I certify that to the best of my knowledge and belief, the above-referenced form(s) meet or exceed the readability, legibility, and format requirements of any applicable laws and regulations in the state of

_____.

Company

Signature

Name

Title

Date